

**State of Wyoming  
End Stage Renal Disease  
Program**

*The Wyoming End Stage Renal Disease Program (ESRD) was created by the legislature in July 1971. Its purpose is to assist low income persons for the expense of their chronic renal disease. After Medicare and private insurance have made payments assistance with the remaining expenses may be available through the ESRD Program. This program does not pay for any medical treatment or hospitalization not directly related to their renal dialysis. In the case of kidney transplants the program covers immunosuppressant medications.*

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Community and Rural Health Division  
End Stage Renal Disease Program  
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**End Stage  
Renal  
Disease  
Program**

**(ESRD)**



**Wyoming  
Department  
of Health**

**Commit to your health.**

## BENEFITS OFFERED TO ELIGIBLE APPLICANTS

Eligibility is determined by two factors: Income Guidelines (Federal Poverty Guideline Level—185%) and Medical Eligibility determined by the State of Wyoming Health Officer.

Eligible applicants are offered the following benefits.

- ⇒ **Maximum Payable Benefit Per Fiscal Year** (July 1—June 30) is \$40,000.
- ⇒ **Prescribed Medications related to ESRD**—Reimbursement is available to assist clients with prescribed medications related to ESRD.
- ⇒ **Medical Claims**—Nephrologists, Dialysis Clinics, hospitals, etc., that provided services directly related to ESRD, will submit the balance owed via a HCFA 1500 or UB 4 claim form, with an explanation of benefit (EOB). All claims are submitted AFTER your insurance carrier has paid.
- ⇒ **Mileage Reimbursement for dialysis and other ESRD related travel.** Travel to a treatment center outside of the client's city of residence, if not covered by Medicaid, may be reimbursed after the trip has been completed. Mileage is determined by use of map miles or odometer readings.

- ⇒ **Per Diem**—If the client is required to travel per their Physicians request, for more than one day at the treatment center and is not hospitalized, lodging is reimbursable per diem at the rate of \$25.00 per night. (ESRD Related only).
- ⇒ **Reimbursement of private health insurance premiums**—Health Insurance Premiums are reimbursable. The program encourages clients to keep their health insurance. Reimbursement for the clients portion of their health insurance premium is available.
- ⇒ **Reimbursement of Medicare Part B Premiums**—Medicare premiums are reimbursable if the premium is not already paid by Medicaid or any other source.
- ⇒ **Home Hemodialysis Treatment**  
Costs of supplies used in home dialysis are reimbursable after your insurance has paid.

### Transplant Clients

Reimbursement for immunosuppressant medications are a benefit only. The ESRD program has an approved list of medications that are reimbursable.

*"In 2003, more than 340,000 individuals received dialysis treatments in over 4,500 facilities across the United States"*

## APPLICATION PROCEDURES:

Application packets are available at the Dialysis Clinics or you may call our office. The following forms submitted together, are considered a complete packet in order to determine eligibility.

- ◆ Application
- ◆ ESRD Confidential Financial
- ◆ Financial Data Form
- ◆ Authorization Form
- ◆ Assistance Requested Form
- ◆ A copy of the HCFA 2728
- ◆ A copy of the FILED Income Tax Return.

The original completed packet should be mailed to the address on the back of this pamphlet. The date of eligibility, is the date the **completed** packet is received or the date of first dialysis; if dialysis treatment starts after receipt of the application.

When the application is approved a letter of approval and other information will be sent to the client. A copy of the approval letter will also be sent to the clients social worker.

### Continuing Information Updates:

While on the ESRD Program clients are responsible for updating their personal information. Changes in name, address, phone, and medical status are **REQUIRED**.

**Financial updates are due by May 30th, every two years to stay on the program.**